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**REQUEST FOR WITHDRAWAL
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Application Number	09/706,279
Filing Date	11-03-2000
First Named Inventor	Joe Shapira
Art Unit	2155
Examiner Name	NGUYEN, THU HA T
Attorney Docket Number	0550503-00003

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the practitioners of record;
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- ☐ the practitioners of record associated with Customer Number: _____

NOTE: The immediately preceding box should only be marked when the practitioners were appointed using the listed Customer Number.

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I am authorized to sign on behalf of myself and all withdrawing practitioners.

Signature

Name Brian Berliner

Registration No. 34549

Address O'Melveny & Myers LLP, 400 South Hope Street

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Date 07/22/2008	Telephone No. 213-430-6000
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NOTE: Withdrawal is effective when approved rather than when received.

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